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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<b>Patent Number</b>	6,658,035
	<b>Grant Date</b>	December 2, 2003
	<b>First Named Inventor</b>	Mason, et al.
	<b>Title</b>	Tunable Laser Source With Integrated Optical Amplifier
	<b>Art Unit</b>	
	<b>Examiner Name</b>	
	<b>Attorney Docket Number</b>	74836-368364

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number : 25764

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with Customer Number:

OR


<input type="checkbox"/> Firm or Individual Name			
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City		State	ZIP
Country			
Telephone		Email	

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

<b>SIGNATURE of Applicant or Assignee of Record</b>		
Signature		
Name	Christopher Dewees, President	
Date	July 7, 2008	Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.